OFFICIAL FILE FORMAL COMPLAINT

ILLINOIS COMMENCE COMMISSION SOMMERCE Commission
527 East Capital Avenue

ORIGINAL

Springfield, Illinois 62701

	For Commission Use Only:
Regarding a complaint	- 37/128
by Peter LEE (Person making the complaint)	Case 12 0200
against 7- Line - Z-TEL Tele Communication Service	
as to Refusing to give me in writing a Bill	Her 20
or Information ofter I Requested for months	
in Chicago Illinois.	THE ROLENK'S OFFI CHIEF CLERK'S OFFI
TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:	OFFIC OFFICE
My mailing address is 1633 W Mad 500 Apt 1908-5	
The service address that I am complaining about is 1633 Luc Madisan	and 1968.5
Chicago Ze WOLL	
My home telephone number is 11-3121 492 - 9767	
Between 8:30 a.m. and 5:00 p.m. weekdays I can be reached at [1-312] 492 - 976	·7
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7-Line - Z-Tel Tele Canana (respondent) is a public utility and (Full name of utility company)	is subject to the provisions of
the Illinois Public Utilities Act.	
in the space below, list the specific section of the law, Commission rule(s), or utility tariffs which y complaint.	ou think are involved with your
JU. ADMIN Code 280.50 and CH	4088
	<u> </u>
lave you contacted the Consumer Affairs Division of the Illinois Commerce Commission about his complaint?	ut YesNo
les your complaint filed with that office been closed?	Yes No

Please state your complaint briefly. Number each of the paragraphs. Please include any specific time period and dollar amount involved with your complaint. Use an extra sheet of paper, if needed.
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After getting Z-Tel Some customers T was aire one to houndard (4100
toom delin 1-09 That requested for a R'll or extended from
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Please clearly state what you want the Commission to do in this case. I want this matter to be bundle according to laws and Robes of this State of Europa loyal Castome. Enough of the forestel to give me free 3 months call for being a loyal Castome. I want and account of the bill from 1 1-02 to 3-02 with phone na
Date: $3-2c\cdot c2$
(Month, day, and year)
Complainant's signature <u>Gette</u>
Complainance and Complain and C
If you will be represented by an attorney, please give the attorney's name, address, and telephone number.
ne afterney of this time, However, I'm Still considering MY
Option, with this matter that have given me great stress!
You need to file the original and three copies of this form with the Commission and also provide the Commission one copy for each utility complained about (referred to as respondents).
VERIFICATION
A notary public must watch you fill out this part of the form.
I, <u>ドイマ ん と e</u>
it says. The contents of this petition are true to the best of my knowledge.
Total De
(Signature)
Subscribed and sworn/affigmed to before me this 39 day of MARCH, 15 2002
/w/M.ll
Notary Public, Illinois OFFICIAL SEAL LARYNAE M CHERRY
NOTE: NOTE: NOTE: MOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 08/25/02 \$
Failure to answer all of the questions on this form may result in this form being returned to you without processing. If you have
questions, please call the counselor in the Consumer Affairs Division that handled your informal complaint.